## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

1849-16102 B-CH

| CLAIMS AS FILED - PART I<br>(Column 1)   |  |   |   |                      | (Column 2)                       |   |        | SMALL ENTITY TYPE   |                        | OTHER THAN OR SMALL ENTITY |                     |                        |
|--|--|---|---|----------------------|----------------------------------|---|--------|---------------------|------------------------|----------------------------|---------------------|------------------------|
| TOTAL CLAIMS 3/  |  |   |   |                      |                                  |   |        | RATE                | FEE                    |                            | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILED                            |                      | NUMBE                            | NUMBER EXTRA                                  |        | BASIC FEE           | 355.00                 | OR                         | BASIC FEE           | 710.00                 |
| TOT  | AL CHARGEA                               | 3/ min  | 3 minus 20=                             |                      | • //                             |   | X\$ 9= | •                   | OR                     | ·X\$18=                    | 198                 |                        |
| INDEPENDENT CLAIMS 7 minus   |  |   |   |                      | s3=' #                           |   |        | X40=                |                        | OR                         | X80=                | 310                    |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |   |                      |                                  |   |        | +135=               |                        | OR                         | +270=               | 0                      |
| * If the difference in column 1 is less than zero, enter "0" in col  |  |   |   |                      |                                  | olumn 2                                       |        | TOTAL               |                        | OR                         | TOTAL               | 1228                   |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  |  |   |   |                      |                                  |   |        | SMALL E             | NTITY                  | OR                         | OTHER<br>SMALL      |                        |
| NTA  |  | CLAIMS REMAINING AFTER AMENDMENT                |   | HIGH<br>NUM<br>PREVI | MEST<br>MBER<br>OUSLY<br>FOR     | PRESENT<br>EXTRA                              |        | RATE                | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
| DME  | . Total                                  | *   | Minus                                   | **                   |                                  | 3   |        | X\$ 9=              |                        | OR                         | X\$18=              |                        |
| AMENDMENT  | Independent                              | •   | Minus                                   | •••                  |                                  | =   |        | X40=                | ·                      | OR                         | X80=                |                        |
|  | FIRST PRESE                              | NTATION OF M                                    | ULTIPLE DE                              | PENDEN               | T CLAIM                          |   |        | +135=               |                        | OR                         | +270=               |                        |
|  |  |   |   |                      |                                  |   |        | TOTAL<br>ADDIT, FEE |                        | OR                         | TOTAL<br>ADDIT. FEE |                        |
|  |  | 6   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                      |                                  |   |        |                     |                        |                            |                     |                        |
| AMENDMENT B  |  | (Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT |   | NUI<br>PREV          | HEST<br>MBER<br>NOUSLY<br>D FOR  | PRESENT<br>EXTRA                              |        | RATE                | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
| OME  | Total                                    | •   | Minus                                   | ••                   |                                  | =   |        | X\$ 9=              |                        | OR                         | X\$18=              |                        |
| ME   | Independent                              | •   | Minus                                   | ***                  |                                  | <u> -                                    </u> | 1      | X40=                |                        | OR                         | X80=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |   |   |                      |                                  |   | .}     | +135=               |                        | OR                         | +270=               |                        |
|  |  |   |   |                      |                                  |   |        | TOTAL<br>ADDIT, FEE |                        | OR                         | TOTAL<br>ADDIT. FEE |                        |
|  |  | (Column 1)                                      |   | (Coli                | umn 2)                           | (Column 3)                                    | )      |                     |                        |                            |                     |                        |
| AMENDMENT C  |  | CLAIMS REMAINING AFTER AMENDMENT                |   | HIG<br>NU<br>PREV    | HEST<br>MBER<br>(IOUSLY<br>D FOR | PRESENT<br>EXTRA                              |        | RATE                | ADDI-<br>TIONAL<br>FEE |                            | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total                                    | •   | Minus                                   | ••                   |                                  | =   |        | X\$ 9=              |                        | OR                         | X\$18=              |                        |
|  | Independent                              |   | Minus                                   | ***                  |                                  | -   | 1      | X40=                |                        | OR                         | X80=                |                        |
| K  | FIRST PRESENTATION OF MULTIPLE DEPENDENT |   |   |                      | NT CLAIN                         |   | J      | +135=               |                        | OR                         |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1. |  |   |   |                      |                                  |   |        |                     |                        |                            |                     |                        |

FORM **PTO-875** (Rev. 8/00)

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